

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|--------------------|--------|---------|
| FEE DETERMINATION | <i>[Signature]</i> | 78891 | 12/16 |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | 8 | 12-9-79 |
| FORMALITY REVIEW | <i>[Signature]</i> | 641665 | 12-30 |

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
☐ N Non-elected
☐ I Interference
☐ A Appeal
☐ O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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